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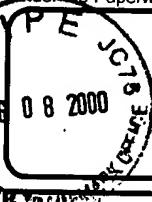
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PTO/SB/29 (8/98)

Approved for use through 09/30/2000. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
Comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box CPA, Washington, DC 20231.

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AUG 08 2000



CONTINUED PROSECUTION APPLICATION (CPA) REQUEST TRANSMITTAL

Submit an original, and a duplicate for fee processing.
(Only for Continuation or Divisional applications under 37 C.F.R. § 1.53(d))

AUG 11 2000

TECH. COMPAT 1600/2900
 DUPLICATE

Address to:

Assistant Commissioner for Patents
Box CPA
Washington, DC 20231

Attorney Docket No. of Prior Application	5995.US.P1
First Named Inventor	Patricia A. Billing-Medel
Examiner Name	L. Arthur
Group / Art Unit	1655
Express Mail Label No.	EL384169032US

This is a request for a continuation or divisional application under 37 C.F.R. § 1.53(d),
(continued prosecution application (CPA)) of prior application number 08/962,094
filed on October 31, 1997, entitled REAGENTS AND METHODS USEFUL FOR DETECTING DISEASES OF THE BREAST

NOTES

FILING QUALIFICATIONS: The prior application identified above must be a nonprovisional application that is either: (1) complete as defined by 37 C.F.R. § 1.51(b), or (2) the national stage of an international application in compliance with 35 U.S.C. 371. A Notice will be placed on a patent issuing from a CPA, except for reissues and designs, to the effect that the patent issued on a CPA and is subject to the twenty-year patent term provisions of 35 U.S.C. § 154(a)(2). Therefore, the prior application of a CPA may have been filed before, on or after June 8, 1995.

C-I-P NOT PERMITTED: A continuation-in-part application cannot be filed as a CPA under 37 C.F.R. § 1.53(d), but must be filed under 37 C.F.R. § 1.53(b).

EXPRESS ABANDONMENT OF PRIOR APPLICATION: The filing of this CPA is a request to expressly abandon the prior application as of the filing date of the request for a CPA. 37 C.F.R. § 1.53(b) must be used to file a continuation, divisional, or continuation-in-part of an application that is not to be abandoned.

ACCESS TO PRIOR APPLICATION: The filing of this CPA will be construed to include a waiver of confidentiality by the applicant under 35 U.S.C. 122 to the extent that any member of the public who is entitled under the provisions of 37 C.F.R. § 1.14 to access to, copies of, or information concerning, the prior application may be given similar access to, copies of, or similar information concerning, the other application or applications in the file jacket.

35 U.S.C. 120 STATEMENT: In a CPA, no reference to the prior application is needed in the first sentence of the specification and none should be submitted. If a sentence referencing the prior application is submitted, it will not be entered. A request for a CPA is the specific reference required by 35 U.S.C. 120 and to every application assigned the application number identified in such request, 37 C.F.R. § 1.78(a).

- Enter the unentered amendment previously filed on _____ under 37 C.F.R. § 1.116 in the prior nonprovisional application.
- A preliminary amendment is enclosed.
- This application is filed by fewer than all the inventors named in the prior application, 37 C.F.R. § 1.53 (d)(4)
 - DELETE** the following inventor(s) named in the prior nonprovisional application:
.....
.....

b. The inventor(s) to be deleted are set forth on a separate sheet attached hereto.

- A new power of attorney or authorization of agent (PTO/SB/81) is enclosed.

- Information Disclosure Statement (IDS) is enclosed: 08/10/2000 KZEW/DIE 00000082 010025 00562031

a. <input type="checkbox"/> PTO-1449	01 FC:131	590.00 CH
b. <input type="checkbox"/> Copies of IDS Citations	02 FC:102	545.00 CH
	03 FC:103	162.00 CH

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box CPA, Washington, DC 20231.

CLAIMS	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATIONS
	TOTAL CLAIMS (37 C.F.R. § 1.16(c) or (j))	29 -20* =	9	x \$18.00 =	\$ 162.00
	INDEPENDENT CLAIMS (37 C.F.R. § 1.16(b) or (i))	10 -3** =	7	x \$78.00 =	546.00
	MULTIPLE DEPENDENT CLAIMS (if applicable) (37 C.F.R. § 1.16(d))			+ \$ _____ =	RECEIVED
				BASIC FEE (37 C.F.R. §1.16)	690.00
				Total of above Calculations =	AUG 11 2000 1,398.00
Reduction by 50% for filing by small entity (Note 37 C.F.R. §§ 1.9, 1.27 & 1.28).					
<small>* Reissue claims in excess of 20 and over original patent.</small> <small>** Reissue independent claims over original patent.</small>					
TOTAL = 1,398.00					

6. Small entity status:

- a. A small entity statement is enclosed, if (b) and (c) do not apply.
- b. A small entity statement was filed in the prior nonprovisional application and such status is still proper and desired.
- c. Is no longer claimed.

7. The Commissioner is hereby authorized to credit overpayments or charge the following fees to Deposit Account No. 01-0025:

- a. Fees required under 37 C.F.R. § 1.16.
- b. Fees required under 37 C.F.R. § 1.17.
- c. Fees required under 37 C.F.R. § 1.18.

8. A check in the amount of \$ _____ is enclosed.9. New Attorney Docket Number, if desired _____

[Prior application Attorney Docket Number will carryover to this CPA unless a new Attorney Docket Number has been provided herein.]

10. a. Receipt For Facsimile Transmitted CPA (PTO/SB/29A)
b. Return Receipt Postcard (Should be specifically itemized, See MPEP 503)11. Other: Exhibit A and Request for Extension of Time

NOTE: *The prior application's correspondence address will carry over to this CPA
UNLESS a new correspondence address is provided below.*

12. NEW CORRESPONDENCE ADDRESS

 Customer Number or Bar Code Label

(Insert Customer No. or Attach bar code label here)

or New correspondence address below

Name

Address

City

Country

State

Zip Code

Telephone

Fax

13. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

Name (Print/Type)

Mimi C. Goller

Signature

Registration No. (Attorney/Agent)

39,046

Date